

Revision: HCFA-PM-87-4 (BERC)
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OMB No.: 0938-0193

State: ARKANSAS

Citation
435.10 and
435.403, and
1902(b) of the
Act, P.L. 99-272
(Section 9529)
and P.L. 99-509
(Section 9405)

2.3 Residence

Medicaid is furnished to eligible individuals who are residents of the State under 42 CFR 435.403, regardless of whether or not the individuals maintain the residence permanently or maintain it at a fixed address.

STATE	AR	A
DATE RECD	JUL 1 1987	
DATE APVD	JUL 30 1987	
DATE EFF	See HCFA-179	
HCFA 179	87-12	

TN No. 87-12
Supersedes
TN No. 86-26

Approval Date JUL 30 1987

Effective Date See HCFA-179

HCFA ID: 1006P/0010P